

AO 435
(Rev. 04/18)

ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS

FOR COURT USE ONLY

TRANSCRIPT ORDER

DUE DATE:

Please Read Instructions:

1. NAME Jay H. Ong		2. PHONE NUMBER (512) 391-6124		3. DATE 4/28/2020	
4. DELIVERY ADDRESS OR EMAIL jong@munsch.com; 1717 West 6th St., Ste 250		5. CITY Austin		6. STATE Texas	7. ZIP CODE 78703
8. CASE NUMBER 20-10096	9. JUDGE Davis	DATES OF PROCEEDINGS			
12. CASE NAME In re Joseph Beninati		10. FROM 4/28/2020		11. TO 4/28/2020	
		LOCATION OF PROCEEDINGS			
		13. CITY Austin		14. STATE TX	
15. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input checked="" type="checkbox"/> BANKRUPTCY	
		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER	
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					
<input type="checkbox"/> OPENING STATEMENT (Defendant)					
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)					
<input type="checkbox"/> OPINION OF COURT					
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING				Entire proceeding	
<input type="checkbox"/> BAIL HEARING				4/28/2020 at 10:00	
17. ORDER					
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
3-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
DAILY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	0.00
18. SIGNATURE /s/ Jay H. Ong				PROCESSED BY Blayne Turner	
19. DATE 4/28/2020				PHONE NUMBER 512-916-5237	
TRANSCRIPT TO BE PREPARED BY				COURT ADDRESS 903 San Jacinto St. 322 Austin TX 78701	
ORDER RECEIVED	DATE	BY			
DEPOSIT PAID				DEPOSIT PAID	
TRANSCRIPT ORDERED				TOTAL CHARGES	
TRANSCRIPT RECEIVED				LESS DEPOSIT	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT				TOTAL REFUNDED	
PARTY RECEIVED TRANSCRIPT				TOTAL DUE	

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ORDER COPY

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U.S. BANKRUPTCY COURT

CLERK

DEPUTY